FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL											
OMB Number:	3235-0287										
Estimated average bu	ırden										

0.5

hours per response:

F

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

							()												
1. Name and Address of Reporting Person* Fuchs Charles S.						2. Issuer Name and Ticker or Trading Symbol CytomX Therapeutics, Inc. [CTMX]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>Fuchs</u> (<u>unaries S</u>	•			ر ا	<u> </u>			<u>caacco, 1</u>		[011.11	- ,		X	Directo	or		10% Ow	ner
(Last)					3. Date of Earliest Transaction (Month/Day/Year) 06/19/2019										Officer (give title below)		Other (s below)	pecify	
C/O CYTOMX THERAPEUTICS, INC.					100	00/13/2013													
151 OYS	STER POIN	NT BLVD., STE.	400		_														
(Street)				- 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
SOUTH	SAN													X	Form f	led by One	Repo	rting Persor	1
FRANCISCO CA 94080														Form filed by More than One Reportin Person					
(City)	(S	State)	(Zip)																
		Tak	ole I - Nor	n-Deriv	vativ	e Sec	curities	s Ac	quired, I	Disp	osed o	f, or Be	nefic	ially	Owned				
1. Title of Security (Instr. 3) 2. Trans Date (Month/I				/Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Yea		, Transaction Dis Code (Instr. 5)		Disposed	urities Acquired (A sed Of (D) (Instr. 3,		4 and Secur Benef Owne		ties For cially (D) I Following (I) (Direct of Indirect Estr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount (A		r Pri	ce	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)
		-	Table II -						uired, Di , option						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,	4. Transaction Code (Inst 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		1	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisabl		xpiration late	Title	Amou or Numb of Share	mber					
Stock Option (Right to	\$11.31	06/19/2019			A		14,000		(1)	0	6/18/2029	Common Stock	14,0	00	\$0.00	14,000		D	

Explanation of Responses:

1. The underlying shares subject to the option vest and become exercisable as to 100% of the total number of shares subject to the option on the earlier of (i) the first anniversary of the grant date or (ii) the date of the 2020 Annual Meeting of the Issuer's stockholders, assuming continuous service as a director until such vesting date.

/s/ Robin Knifsend, as

Attorney-in-Fact for Charles S. 06/21/2019

Date

Fuchs

** Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.